

## Message Text

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ACTION AID-31

INFO OCT-01 AF-08 ISO-00 OES-06 IGA-02 HEW-04 CIAE-00

INR-07 NSAE-00 /059 W

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R 060915Z MAY 76

FM AMEMBASSY LOME

TO SECSTATE WASHDC 581

INFO AMEMBASSY ABIDJAN

AMEMBASSY NIAMEY

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FOR AID/AFR/CWR SHEAR

E.O. 11652: N/A

SUBJECT: TOGO NATIONAL FAMILY HEALTH CENTER: FORK IN THE ROAD

REF: STATE 09839

1. THIS MESSAGE IS PRODUCT OF REVIEW BY AMBASSADOR, DCM AND  
TDY AID OF STATUS SUBJECT PROJECT.

2. RECENT WASHINGTON-LOME DISCUSSION OF FAMILY HEALTH PROJECT SEEMS TO

FOCUS ALMOST EXCLUSIVELY ON ACADEMIC QUESTION OF PRIORITY GOT  
GIVES TO PREVENTIVE AS OPPOSED TO CURATIVE MEDICINE. IF THERE ARE  
FUNDAMENTAL OBJECTIONS TO TOGOLESE APPROACH TO HEALTH MATTERS ON  
AID'S PART, WE SHOULD ADDRESS THEM BEFORE ENTERING INTO NEW  
ROUND OF DISCUSSIONS WITH GOT OFFICIALS WHICH WOULD STIMULATE  
THEIR FURTHER EXPECTATIONS OF USG ASSISTANCE. WE REMIND DEPART-  
MENT THAT US COMMITMENT ON THIS PROJECT WAS MADE IN EXCHANGE  
OF LETTERS BETWEEN MINISTER HEALTH AND AMBASSADOR IN JANUARY  
1975--BEFORE DRAFT OF DAP RECEIVED ACCORDING THO WHOSE PRE-  
SCRIPTION WE NOW ARE REQUIRED TO RESHAPE THIS FORMAL COMMITMENT.

3. IT IS BY NO MEANS CLEAR IN WHAT PROPORTIONS TOGO'S HEALTH

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BUDGET WAS DIVIDED BETWEEN CURATIVE AND PREVENTIVE SERVICES IN

1975, NOR IS IT CLEAR WHAT WILL BE ALLOCATED FOR HEALTH PROGRAM IN 1976-80 DEVELOPMENT PLAN. BULK OF 1976-80 HEALTH MONIES (6.4 OF 7.8 BILLION CFA) WILL BE DEVOTED TO "RESEAU SANITAIRE" WHICH INCLUDES HOSPITALS, WITH AND WITHOUT HEALTH CENTERS, PRIMARY HEALTH CENTERS, MOTHER-CHILD CENTERS, LEPROSARIUMS AND SIMILAR FACILITIES. ALTHOUGH USAID HEALTH TEAM SCHEDULED TO VISIT TOGO PROBABLY COULD ARRIVE AT SOME KIND OF STATISTICAL EXPRESSION OF PROPORTION OF BUDGET DEVOTED, FOR EXAMPLE BY HOSPITAL/HEALTH CENTER, TO PREVENTIVE VERSUS CURATIVE ENDEAVOR, WE DOUBT UTILITY OF SENDING TEAM FOR SUCH PURPOSE.

4. WHAT MAY SEEM TO BE HEAVY EMPHASIS ON CURATIVE MEDICINE IS A RESPONSE TO LOCAL POLITICAL AND SOCIAL REALITIES. A GOVERNMENT WHICH CASTS ITSELF IN A BENEVOLENT ROLE MUST SHOW TANGIBLE PROGRESS IN MAKING AVAILABLE MEDICAL SERVICES. AS TOGOLESE COME INTO INCREASING CONTACT WITH MODERN LIFESTYLE, THEY NO LONGER TAKE FATALISTIC ATTITUDE TO ILLNESS AND THEY EXPECT GOT TO RESPOND TO THEIR NEW EXPECTATIONS. DECISION TO BUILD TEACHING HOSPITAL IS UNDERSTANDABLE RESPONSE TO FACT THAT MOST TOGOLESE MD'S TRAINED ABROAD NEVER RETURN.

5. THESE REALITIES WILL NOT CHANGE SO AS TO ENABLE GOT TO RECEIVE THE LESS THAN \$1 MILLION AID MONEY AT STAKE IN THIS PROJECT. ON OTHER HAND, RESPONSIBLE TOGOLESE ARE FULLY AWARE OF COST-BENEFITS OF PREVENTIVE MEDICINE. GOT BUDGET OVER YEARS HAS PROVIDED FUNDS FOR PURELY PREVENTIVE SERVICES RANGING FROM FIRE BRIGADE "GRAND EPIDEMIES" AND MOTHER-CHILD CENTERS TO MASS INOCULATION CAMPAIGNS AND LEPROSY ERADICATION. PROCESS BY WHICH NEEDS IN TWO SECTORS ARE BALANCED--AS FAR AS WE CAN MAKE OUT--IS NOT UNLIKE NORMAL BUDGETING PROCESS IN MOST COUNTRIES, INCLUDING OUR OWN. EACH GOVERNMENT SERVICE, WHETHER PREVENTIVE OR CURATIVE IN ORIENTATION, PLANS TO IMPROVE ITS EFFECTIVENESS AND SUBMITS CORRESPONDING BUDGET REQUESTS. THE GOVERNMENT FINDS ALL REQUESTS DESIRABLE AND REFUSES TO CHOOSE ONE COURSE TO EXCLUSION OF ANOTHER.

6. GIVEN THESE NOT-SO-EXCLUSIVELY TOGOLESE REALITIES, AID CAN BOOST PREVENTIVE MEDICINE HERE BY SUPPORTING AN INSTITUTION WHICH WILL TRAIN PEOPLE IN PREVENTIVE PRACTICES--CHILD CARE AND FAMILY PLANNING--AND SEND THEM OUT TO USE THEIR NEW SKILLS LIMITED OFFICIAL USE

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IN DISPENSARIES AND FAMILY HEALTH CENTERS AROUND THE COUNTRY. MOREOVER, A SUCCESSFUL PROJECT MIGHT EASILY ENCOURAGE OTHER TOGOLESE INITIATIVES TO EXPAND PREVENTIVE-ORIENTED SERVICES. CERTAINLY, CAUSE OF PREVENTIVE MEDICINE IS BETTER SERVED BY THIS COURSE THAN BY REFUSING PARTICULAR ASSISTANCE WHICH GOT THROUGH TWO MINISTERS HAS REQUESTED.

7. WE AGREE AID SHOULD SEEK REASONABLE ASSURANCES THAT GOT IS,

AS MISSION BELIEVES, COMMITTED TO FAMILY HEALTH CENTER PROJECT. AID SHOULD NOT, HOWEVER, INSIST UPON CHANGE IN ALLOCATION OF HEALTH BUDGET BETWEEN PREVENTIVE AND CURATIVE MEDICAL SERVICES. LATTER COURSE WILL NOT SUCCEED, GIVEN SMALL SIZE OF AID PROGRAMS IN TOGO AND MINIMAL LEVERAGE THEY GENERATE. TO TRY TO FOLLOW THIS COURSE WOULD OFFEND TOGOLESE SENSE OF SOVEREIGNTY AND, LIKE REFTTEL, COME VERY CLOSE TO CALLING MINISTER OF PLAN DOGO'S INTEGRITY INTO QUESTION. THUS, IF AID JUDGES TOGO'S GENERALIZED COMMITMENT TO PREVENTIVE MEDICINE INSUFFICIENT AND A BAR TO PROJECT APPRTVAL, MISSION BELIEVES IT WOULD BE IN BEST INTEREST OF WHAT WE ARE TRYING TO ACHIEVE IN TOGO TO DROP THIS PROJECT NOW WITHOUT FURTHER ADO. WE MAKE THIS SUGGESTION RELUCTANTLY BECAUSE WE BELIEVE THAT FAMILY HEALTH PROJECT IS SOUND AND DESIRABLE FOR TOGO AND, AT SAME TIME, WOULD PROMOTE MAJOR US FOREIGN POLICY OBJECTIVE IN POPULATION AREA--AND FINALLY BECAUSE OUR CREDIBILITY IS ON THE LINE.

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## Message Attributes

**Automatic Decaptioning:** X  
**Capture Date:** 01 JAN 1994  
**Channel Indicators:** n/a  
**Current Classification:** UNCLASSIFIED  
**Concepts:** MEDICAL CARE, PROGRAMS (PROJECTS)  
**Control Number:** n/a  
**Copy:** SINGLE  
**Draft Date:** 06 MAY 1976  
**Decaption Date:** 01 JAN 1960  
**Decaption Note:**  
**Disposition Action:** RELEASED  
**Disposition Approved on Date:**  
**Disposition Authority:** ShawDG  
**Disposition Case Number:** n/a  
**Disposition Comment:** 25 YEAR REVIEW  
**Disposition Date:** 28 MAY 2004  
**Disposition Event:**  
**Disposition History:** n/a  
**Disposition Reason:**  
**Disposition Remarks:**  
**Document Number:** 1976LOME00982  
**Document Source:** CORE  
**Document Unique ID:** 00  
**Drafter:** n/a  
**Enclosure:** n/a  
**Executive Order:** N/A  
**Errors:** N/A  
**Film Number:** D760175-0546  
**From:** LOME  
**Handling Restrictions:** n/a  
**Image Path:**  
**ISecure:** 1  
**Legacy Key:** link1976/newtext/t19760585/aaaacuhy.tel  
**Line Count:** 132  
**Locator:** TEXT ON-LINE, ON MICROFILM  
**Office:** ACTION AID  
**Original Classification:** LIMITED OFFICIAL USE  
**Original Handling Restrictions:** n/a  
**Original Previous Classification:** n/a  
**Original Previous Handling Restrictions:** n/a  
**Page Count:** 3  
**Previous Channel Indicators:** n/a  
**Previous Classification:** LIMITED OFFICIAL USE  
**Previous Handling Restrictions:** n/a  
**Reference:** 76 STATE 9839  
**Review Action:** RELEASED, APPROVED  
**Review Authority:** ShawDG  
**Review Comment:** n/a  
**Review Content Flags:**  
**Review Date:** 25 JUN 2004  
**Review Event:**  
**Review Exemptions:** n/a  
**Review History:** RELEASED <25 JUN 2004 by izenbei0>; APPROVED <12 OCT 2004 by ShawDG>  
**Review Markings:**

Margaret P. Grafeld  
Declassified/Released  
US Department of State  
EO Systematic Review  
04 MAY 2006

**Review Media Identifier:**  
**Review Referrals:** n/a  
**Review Release Date:** n/a  
**Review Release Event:** n/a  
**Review Transfer Date:**  
**Review Withdrawn Fields:** n/a  
**Secure:** OPEN  
**Status:** NATIVE  
**Subject:** TOGO NATIONAL FAMILY HEALTH CENTER: FORK IN THE ROAD  
**TAGS:** SOCI, EAID, TO, US  
**To:** STATE  
**Type:** TE  
**Markings:** Margaret P. Grafeld Declassified/Released US Department of State EO Systematic Review 04 MAY 2006